



### Part 1: Local Educational Agency Information

<b>Name of School</b>	<b>Name of School Principal or Executive Director (Public Charter Schools Only)</b>
Cedar Tree Academy Public Charter School	LaTonya Henderson - Executive Director
<b>Full Address of School</b>	<b>Email Address of School Principal or Executive Director (Public Charter Schools Only)</b>
701 Howard Road SE Washington DC 20020	<a href="mailto:lhenderson@cedartree-dc.org">lhenderson@cedartree-dc.org</a>
<b>Main Telephone Number of School</b>	<b>Telephone Number of School Principal or Executive Director (Public Charter Schools Only)</b>
202-610-4193	202.610.4193
<b>Name of Primary School Contact for Title I School Plan</b>	<b>Name of Additional School Contact for Title I School Plan</b>
Usha Jayanthi	Dr. Lewis Breed Love
<b>Position Title of Primary School Contact for Title I School Plan</b>	<b>Position Title of Additional School Contact for Title I School Plan</b>
Accounts Manager	Dir. Parent Center
<b>Email Address of Primary School Contact for Title I School Plan</b>	<b>Email Address of Additional School Contact for Title I School Plan</b>
<a href="mailto:ujayanthi@cedartree-dc.org">ujayanthi@cedartree-dc.org</a>	<a href="mailto:lbrewis@cedartree-dc.org">lbrewis@cedartree-dc.org</a>
<b>Telephone Number of Primary School Contact for Title I School Plan</b>	<b>Telephone Number of Additional School Contact for Title I School Plan</b>
202-610-4193	202.610.4193

### Part 2: LEA Certification

I certify that all of the information contained in this application is true and accurate to the best of my knowledge.  
 Additionally, I certify that the LEA agrees to all assurances included in the application.  
 I have been authorized to file this application on behalf of the agency named above.

<b>Name of Individual Certifying Title I School Plan (Chief Academic Officer or Executive Director)</b>	<b>Signature of Individual Certifying Title I School Plan (Chief Academic Officer or Executive Director)</b>
Dr. LaTonya Henderson	<i>LaTonya Henderson</i>
<b>Title of Individual Certifying Title I School Plan (Chief Academic Officer or Executive Director)</b>	<b>Date of Certification (input at the time of signature)</b>
Executive Director	8/15/13

**SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO [CON.APP@DC.GOV](mailto:CON.APP@DC.GOV).**

### OSSE Use Only

<b>Date Title I School Plan First Received:</b>	
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810 First Street, NE, 9th floor, Washington, DC 20002